

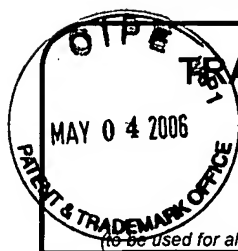
05-05-06

PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

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TRANSMITTAL  
FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission	Application Number	10/687,344
	Filing Date	October 15, 2003
	First Named Inventor	Osorio, et al.
	Art Unit	3736
	Examiner Name	Michael C. Astorino
	Attorney Docket Number	011738.00149

## ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) ____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Response to Notice of Non-Compliant Amendment (37 CFR 1.121), 2 pages Copy of Response/Amendment as previously faxed to PTO on 12/5/2005 (28 pages) Certificate of Express Mail Return Receipt Postcard
<b>Remarks</b> The Commissioner is authorized to charge any fees in connection with this correspondence to Deposit Account No. 19-0733. A duplicate of this sheet is enclosed.		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm	Banner & Witcoff, Ltd.		
Signature			
Printed Name	Binal J. Patel		
Date	May 4, 2006	Reg. No.	42,065

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Typed or printed name		Date	

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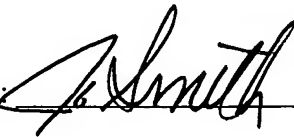


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(PATENT)**

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Deposited: May 4, 2006

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By:  \_\_\_\_\_

Patent Application of:	Osorio, et al.
Serial No.	10/687,344
Title:	Screening Techniques For Management Of A Nervous System Disorder
Attorney Docket No.	011738.00149

- Transmittal Letter, 1 page
- Response to Second Notice of Non-Compliant Amendment (37 CFR 1.121), 2 pages
- Response/Amendment as previously faxed to PTO on 12/5/2005 (28 pages)
- Return Receipt Postcard



**PATENT**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**  
(Attorney Docket No. 011738.00149)

In re Application of:	)	
	)	
Ivan Osorio, <i>et al.</i>	)	
	)	Group Art Unit: 3736
Serial No.: 10/687,344	)	
	)	Examiner: Michael C. Astorino
Filed: October 15, 2003	)	
	)	Confirmation No. 7817
For: SCREENING TECHNIQUES FOR	)	
MANAGEMENT OF A NERVOUS	)	
SYSTEM DISORDER	)	

**RESPONSE TO SECOND NOTICE OF NON-COMPLIANT AMENDMENT**  
**(37 CFR 1.121)**

Mail Stop: AMENDMENT  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313.1450

Sir:

This paper is responsive to the April 4, 2006 Office Action. The Office Action indicated that a subsequently submitted copy of the response, which was originally submitted on December 5, 2005, was non-compliant because of problems with the quality of the facsimile and a response was due within 1 month of the date of mailing of the Office Action, making this paper due on or before May 4, 2006.

Applicants note that two attempts were made to provide a legible copy of the response in response to the first notice of a non-compliant amendment, first on March 6, 2006 a copy of the response was submitted again by facsimile. In addition, on March 7, 2006 a copy of the response was sent by express mail. Therefore,

Applicants believe the facsimile copy is likely the copy that the Examiner is referring to as being non-compliant because the copy of the response submitted by Express mail should have been received without problems.

However, to ensure the previously submitted response is received in a legible manner, another copy of the response originally submitted on December 5, 2005 is being submitted with this paper and this additional copy and this paper are being filed via Express mail. No fees are believed owed with this response, however, the Commissioner is authorized to debit or credit our Deposit Account 19-0733 accordingly for any fees owed or for any overpayment made.

Respectfully Submitted,

BANNER & WITCOFF, LTD.

Dated: May 4, 2006

By: 

Binal J. Patel  
Reg. No. 42,065

Banner & Witcoff, Ltd.  
Ten South Wacker Drive  
Suite 3000  
Chicago, Illinois 60606  
Tel: (312) 463-5000  
Fax: (312) 463-5001



TO: Fax Sender at 13124635001

Fax Information

Date Received: 12/5/2005 5:41:08 PM [Eastern Standard Time]

Total Pages: 27 (including cover page)

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Cover  
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10 SOUTH WACKER DRIVE, SUITE 3000  
CHICAGO, ILLINOIS 60606

TEL: 312.463.5000  
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www.bannerwitcoff.com

### FACSIMILE TRANSMITTAL SHEET

<b>TO:</b>	<b>FROM:</b>
U.S. Patent And Trademark Office	Binal J. Patel
<b>COMPANY:</b>	<b>DATE:</b>
Mail Stop AMENDMENT	December 5, 2005
<b>FAX NO:</b>	<b>TOTAL NO. OF PAGES: (Including cover sheet)</b>
571-273-8300	27
<b>YOUR REFERENCE NO.:</b>	<b>OUR REFERENCE (C/M) NO.:</b>
	011738.00149

**RE:** Filing Of Response/Amendment and 1 month extension of time For U.S. Serial No.  
10/687,344  
Application Of Osorio, et al.  
Filed October 15, 2003  
Title: Screening Techniques For Management Of A Nervous System Disorder

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<b>NAME:</b>	<b>PHONE:</b>
Kathy Kessling	312-463-5505

**COMMENTS:**

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PAGE 1/27 \* RCV'D AT 12/05/2005 5:11:08 PM (Eastern Standard Time) \* SVZ:USPTO-EPX05-401 \* C/05-2738300 \* CSID:13124635001 \* DURATION: 00:01:05.76



<b>OIP TRANSMITTAL FORM</b> <small>(to be used for all correspondence after initial filing)</small>		Application Number	10/687,344
		Filing Date	October 15, 2003
		First Named Inventor	Osorio, et al.
		Art Unit	3736
		Examiner Name	Michael C. Astorino
Total Number of Pages in This Submission		Attorney Docket Number	011738.00149

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Fax Cover sheet
<b>Remarks</b> The Commissioner is authorized to charge any fees in connection with this correspondence to Deposit Account No. 19-0733. A duplicate of this sheet is enclosed.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm	Banner & Witcoff, LTD.		
Signature			
Printed Name	Binal J. Patel		
Date	December 5, 2005	Reg. No.	42,065

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Signature			
Typed or printed name	Thomas Wilson	Date	December 5, 2005

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<b>Effective on 12/08/2004.</b> Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). <b>FEE TRANSMITTAL</b> <b>for FY 2005</b> MAY 04 2006 <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		<b>Complete if Known</b> Application Number: 10/687,344 Filing Date: October 15, 2003 First Named Inventor: Osorio, et al. Examiner Name: Michael C. Astorino Art Unit: 3736 Attorney Docket No.: 011738.00149	
TOTAL AMOUNT OF PAYMENT (\$)		320.00	

## METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify) : \_\_\_\_\_

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## FEE CALCULATION

## 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee(\$)	Fee(\$)	Small Entity Fee(\$)	Fee(\$)	Small Entity Fee(\$)	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

## 2. EXCESS CLAIM FEES

## Fee Description

Each claim over 20 (including Reissues)

Small Entity Fee (\$)

50

Each independent claim over 3 (including Reissues)

200

Multiple dependent claims

360

Total Claims

Extra Claims

Fee(\$)

Fee Paid (\$)

Multiple Dependent Claims

Fee (\$)

Fee Paid (\$)

\_\_\_\_\_ - 20 or HP = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims

Extra Claims

Fee(\$)

Fee Paid (\$)

\_\_\_\_\_ - 3 or HP = 1 x 200.00 = 200.00

HP = highest number of independent claims paid for, if greater than 3.

## 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)

\_\_\_\_\_ - 100 = \_\_\_\_\_ / 50 = \_\_\_\_\_ (round up to a whole number) x \_\_\_\_\_ = \_\_\_\_\_

## 4. OTHER FEE(S)

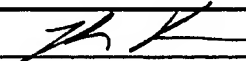
Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Petition for One Month Extension of Time

Fees Paid (\$)

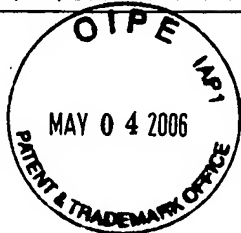
120.00

## SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	42,065	Telephone	312-463-5000
Name (Print/Type)	Binal J. Patel	Date	December 5, 2005		

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571-273-8300	27
<b>YOUR REFERENCE NO.:</b>	<b>OUR REFERENCE (C/M) NO.:</b>
	011738.00149
<b>RE:</b>	<b>Filing Of Response/Amendment and 1 month extension of time For U.S. Serial No.</b>
	10/687,344
	<b>Application Of Osorio, et al.</b>
	<b>Filed October 15, 2003</b>
	<b>Title: Screening Techniques For Management Of A Nervous System Disorder</b>

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Kathy Kessler	312-463-5505

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